## <u>020014452</u>

## FEC FORM 1

## STATEMENT OF ORGANIZATION

(See instructions)

SECRETARY OF THE SENATE

11 JAN 28 PM 4:48

Office use only

1.	NAME OF COMMITTEE (in full)	Carlotte S	(Check if name is changed)	Example: If typyi over the lines	ng, type	12FE4M5	and province of the second
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Entered.		Che	shire			CT _	06410
			(	DITY_		STATE	ZIP CODE 📥
COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)							
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	is changed)	1 - 1			1 1 1 1		
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COMMITTEE'S WEB PAGE ADDRESS (URL)							
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2. DATE M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y							
3. FEC IDENTIFICATION NUMBER  C							
4. IS THIS STATEMENT X NEW (N) OR AMENDED (A)							
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete							
Type or Print Name of Treasurer Kathy Altobello							
Signature of Treasurer Electronically Filed by Kathy Altobello Date O.7 2.0 1.1							
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.  ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS							
Office.							
	Use Only			For further in Federal Elect Toll Free 800 Local 202-69	ion Commissi -424-9530		FEC FORM 1 (Revised 02/2009)